

County: Waukesha
LINDEN GROVE - MUKWONAGO

Facility ID: 5240

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837 COUNTY ROAD NN E
MUKWONAGO 53149 Phone: (262) 363-6830
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? Yes
Number of Beds Set Up and Staffed (12/31/00): 56
Total Licensed Bed Capacity (12/31/00): 56
Number of Residents on 12/31/00: 56

Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified?
Average Daily Census:

Nonprofit Church-Related
Skilled
Yes
Yes
54

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)	
		Primary Diagnosis	%	Age Groups	%		%
Home Health Care	No					Less Than 1 Year	42.9
Supp. Home Care-Personal Care	No					1 - 4 Years	57.1
Supp. Home Care-Household Services	No	Developmental Disabilities	1.8	Under 65	1.8	More Than 4 Years	0.0
Day Services	No	Mental Illness (Org./Psy)	37.5	65 - 74	5.4		
Respite Care	No	Mental Illness (Other)	1.8	75 - 84	35.7		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	50.0	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	7.1	Full-Time Equivalent	
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Residents	
Home Delivered Meals	No	Fractures	5.4		100.0	(12/31/00)	
Other Meals	No	Cardiovascular	17.9	65 & Over	98.2		
Transportation	No	Cerebrovascular	8.9			RNs	12.9
Referral Service	No	Diabetes	1.8	Sex	%	LPNs	5.5
Other Services	Yes	Respiratory	3.6			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	21.4	Male	14.3	Aides & Orderlies	
Mentally Ill	No			Female	85.7		46.7
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other			Private Pay		Managed Care			Total No.	Percent Of All Residents	
	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%			Per Diem Rate
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Skilled Care	6	100.0	\$225.00	23	85.2	\$100.04	0	0.0	\$0.00	23	100.0	\$167.00	0	0.0	\$0.00	52	92.9%
Intermediate	---	---	---	4	14.8	\$84.41	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	4	7.1%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	6	100.0		27	100.0		0	0.0		23	100.0		0	0.0		56	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Percent Admissions from:						
Private Home/No Home Health	0.0	Bathing	0.0	32.1	67.9	56
Private Home/With Home Health	0.0	Dressing	19.6	32.1	48.2	56
Other Nursing Homes	4.1	Transferring	28.6	69.6	1.8	56
Acute Care Hospitals	80.8	Toilet Use	28.6	69.6	1.8	56
Psych. Hosp. -MR/DD Facilities	0.0	Eating	46.4	21.4	32.1	56
Rehabilitation Hospitals	0.0	*****				
Other Locations	15.1	Continence				
Total Number of Admissions	73	Indwelling Or External Catheter	3.6	Special Treatments		%
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	55.4	Receiving Respiratory Care		10.7
Private Home/No Home Health	14.3	Occ/Freq. Incontinent of Bowel	55.4	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	10.0			Receiving Suctioning		0.0
Other Nursing Homes	0.0	Mobility		Receiving Ostomy Care		0.0
Acute Care Hospitals	0.0	Physically Restrained	5.4	Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	0.0			Receiving Mechanically Altered Diets		25.0
Rehabilitation Hospitals	0.0	Skin Care		Other Resident Characteristics		
Other Locations	31.4	With Pressure Sores	3.6	Have Advance Directives		100.0
Deaths	44.3	With Rashes	7.1	Medications		
Total Number of Discharges				Receiving Psychoactive Drugs		37.5
(Including Deaths)	70			*****		

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.4	87.5	1.10	84.5	1.14
Current Residents from In-County	67.9	83.6	0.81	77.5	0.88
Admissions from In-County, Still Residing	31.5	14.5	2.17	21.5	1.47
Admissions/Average Daily Census	135.2	194.5	0.69	124.3	1.09
Discharges/Average Daily Census	129.6	199.6	0.65	126.1	1.03
Discharges To Private Residence/Average Daily Census	31.5	102.6	0.31	49.9	0.63
Residents Receiving Skilled Care	92.9	91.2	1.02	83.3	1.11
Residents Aged 65 and Older	98.2	91.8	1.07	87.7	1.12
Title 19 (Medicaid) Funded Residents	48.2	66.7	0.72	69.0	0.70
Private Pay Funded Residents	41.1	23.3	1.76	22.6	1.82
Developmentally Disabled Residents	1.8	1.4	1.31	7.6	0.23
Mentally Ill Residents	39.3	30.6	1.28	33.3	1.18
General Medical Service Residents	21.4	19.2	1.12	18.4	1.16
Impaired ADL (Mean) *	53.2	51.6	1.03	49.4	1.08
Psychological Problems	37.5	52.8	0.71	50.1	0.75
Nursing Care Required (Mean) *	5.8	7.8	0.75	7.2	0.81